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FACSIMILE COVER SHEET

February 3, 2006

Receiver: Examiner Nguyen, H. / Art Unit 2812
USPTO

FAX # : 571-273-8300

Sender: Leslie Russell, Patent Secretary for:
Jeffrey K. Weaver – Registration No. 31,314

Our Ref. No.: NOVLP016C1/NVLS-2403C1

Your Ref No.: 10/693,223

Re: Response to Office Action

Pages Including Cover Sheet(s): 8

MESSAGE:

Fax Cover Sheet – 1 Page
Amendment Transmittal – 1 Page
Amendment A – 6 Pages

CONFIDENTIALITY NOTE

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FEB 03 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Patton et al.

Atty Dkt No.: NOVLP016C1/NVLS-
2403C1

Application No.: 10/693,223

Examiner: Nguyen, H.

Filed: October 24, 2003

Group: 2812

Title: SEQUENTIAL STATION TOOL FOR
WET PROCESSING OF
SEMICONDUCTOR WAFERS

CERTIFICATE OF FACSIMILE TRANSMISSION
 I hereby certify that this correspondence is being transmitted by facsimile to number 571-273-8300, attention Examiner Nguyen H., at
 the U.S. Patent and Trademark Office on February 3, 2006.
 Signed: Leslie Russell

AMENDMENT TRANSMITTAL

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.
 The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	13	MINUS	27		x 25 =	x 50 = 0.00
Independent Claims	2	MINUS	3		x 100 =	x 200 = 0.00
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$0.00

- ☒ Applicant(s) hereby petition for a 1 month extension(s) of time to respond to the
aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is
determined that such an extension is required, Applicant(s) hereby petition that such an extension
be granted and authorize the Commissioner to charge the required fees for an Extension of Time
under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional
claim fee and/or extension of time fees.
- ☒ Please charge the required fees of \$120.00 or any additional fees required to facilitate filing the
enclosed response, to Deposit Account No. 500388 (Order No. NOVLP016C1).

Respectfully submitted,
 BEYER WEAVER & THOMAS, LLP

Jeffrey K. Weaver
 Jeffrey K. Weaver
 Reg. No. 31,314

P.O. Box 70250
 Oakland, CA 94612-0250

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Signed: 

Leslie Russell

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated October 14, 2005, please amend the above-
identified application as follows:

Amendments to the Claims appear in the Listing of Claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.